

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

* 01-348

Pantelis Michalopoulos

Washington, DC 20036-

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

3 Service Type

☐ Certified Mail ☐ Express Mail☐ Insured Mail ☐ C.O.O.

4. Restricted Delivery? (Extra Fee)

☐ Yes

DOCKET NO. 01-348

CERTIFIED
MAIL

RETURN

RECEIPT

REQUESTED

NAME: Pantelis Michalopoulos
 Steptoe & Johnson LLP
 1330 Connecticut Avenue, N.W.
 Washington, DC 20036-

C. R. R. NO.

BY

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Postage \$

-

60

Certified Fee

2

30

Return Receipt Fee
(Endorsement Required)

1

75

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

4

65

Name (Please Print Clearly) (to be completed by mailer)

Pantelis Michalopoulos

Street, Apt. No., or PO Box No.

1330 Connecticut Avenue, N.W.

City, State, ZIP+4

Washington, DC 20036

PS Form 3800, July 1999

See Reverse for Instructions